



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# **POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM**

|                        |                       |
|------------------------|-----------------------|
| Application Number     | 10/804,545            |
| Filing Date            | 03/19/2004            |
| First Named Inventor   | David B. Anderson     |
| Title                  | System and Method ... |
| Art Unit               | 3753                  |
| Examiner Name          | unknown               |
| Attorney Docket Number | HES 2001-IP-003406U1  |

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

| Name         | Registration Number |
|--------------|---------------------|
| see attached |                     |
|              |                     |
|              |                     |
|              |                     |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

|  |  |       |  |     |  |
|--|--|-------|--|-----|--|
| <input type="checkbox"/> Firm or Individual Name |  |       |  |     |  |
| Address  |  |       |  |     |  |
| Address  |  |       |  |     |  |
| City   |  | State |  | Zip |  |
| Country  |  |       |  |     |  |
| Telephone  |  | Fax   |  |     |  |

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE of Applicant or Assignee of Record**

|           |                    |           |              |
|-----------|--------------------|-----------|--------------|
| Name      | John W. Wustenberg |           |              |
| Signature |                    |           |              |
| Date      | 21 JUN 04          | Telephone | 580.251.3782 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Please type a plus sign (+) inside this box → ☐ +

Approved for use through 8/30/06. OMB 0951-0052

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

# DECLARATION

## REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)



THIS PAGE BLANK (USPTO)

BEST AVAILABLE COPY

| Name  | Registration Number | Name                         | Registration Number |
|---|---------------------|------------------------------|---------------------|
| Halliburton Energy Services, Inc. Practitioners |                     | Haynes & Boone Practitioners |                     |
| William E. Shull                                | 29,438              | Warren B. Kice               | 22,732              |
| William M. Imwalle                              | 35,904              | Randall C. Brown             | 31,213              |
| Robert A. Kent                                  | 28,626              | Priscilla L. Ferguson        | 42,531              |
| Craig W. Roddy                                  | 36,256              | Richard V. Wells             | 53,757              |
| John W. Wustenberg                              | 35,415              | Gloria Norberg               | 36,706              |

**Duration Hour Statement:** This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual user. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20591. DO NOT SEND FORM OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20591.

Declaration — Registered Practitioner Information (Supplemental Sheet) (PTO/SB/02C)(1-1.4)